

# Westchester Community College International Travel Application Form

## Instructions

All sections of this form must be completed except for the Medical section, which is optional. You must sign this application, and if you are under 18 years of age you must have a parent or guardian sign.

Return the application to:

Office of Student Development and Support Services  
Student Center Room 219

Country to which you wish to travel: \_\_\_\_\_

Program/club/course in which you wish to participate: \_\_\_\_\_

Semester you expect to enter program:     Fall 20\_\_     Spring 20\_\_     Summer 20\_\_

## General Information

Legal Name \_\_\_\_\_

Social Security# \_\_\_\_\_

Mailing Address \_\_\_\_\_

Date of Birth \_\_\_\_\_

\_\_\_\_\_

Are you a U.S. citizen? \_\_\_\_\_

Home telephone \_\_\_\_\_

Cell phone \_\_\_\_\_

Email \_\_\_\_\_

If you have a current passport:

Passport country and number \_\_\_\_\_

Passport expiration date \_\_\_\_\_

## Motivation

How did you learn about this program? \_\_\_\_\_

\_\_\_\_\_

What are your reasons for choosing this program? \_\_\_\_\_

\_\_\_\_\_

Have you travelled abroad before? \_\_\_\_\_

\_\_\_\_\_

**If yes, have you ever visited the country where you plan to study/visit?**

\_\_\_\_\_

## Medical (optional)

If you have a physical, hearing, visual, or learning disability, please list below. This information will be kept confidential; it will be used only in accordance with law and to provide appropriate services to those who may need them.

Is there any existing physical limitation and/or mental condition that may affect your participation? If yes, what special care or accommodation do you expect from the College? \_\_\_\_\_

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Are you currently using any prescription drugs that a medical professional needs to be aware of in case of emergency? If yes, please list them. \_\_\_\_\_

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Are you holding a medical insurance policy covering foreign travel? Yes \_\_\_ No \_\_\_

NOTE: If you are uncertain if your insurance company covers foreign travel, it is strongly advised that you check prior to departure.

## Signature

I have read the above and all statements made are true to the best of my knowledge.

Signature: \_\_\_\_\_

Date \_\_\_\_\_

Parent or Guardian Signature  
(if under 18 years of age)

\_\_\_\_\_

Date \_\_\_\_\_